

## **NH Office of Highway Safety**

## **Equipment Inventory Form HS-14**



This form is a Federal Requirement of NHTSA.

It must be completed <u>every two years</u> after purchase, until the equipment has attained its depreciation period. This is a review of all equipment purchased with Federal Funding through the NH Office of Highway Safety. Failure to complete and return this form may jeopardize eligibility for future Highway Safety Grants.

## **Organization Information**

Organization:
Contact Name & Title:
Address:
Telephone:
Email:
Equipment Information
Date of Purchase:
Equipment Description: (include Quantity)
Make & Model:
Serial Number(s):
Is the above named equipment still in use?
If <b>Yes</b> , what is the condition of the equipment? Please indicate any issues or concerns.
If <b>No</b> , your organization must submit a completed <b>DSAD 94</b> Request for Disposal of Grant Funded Project Equipment. This can be obtained by contacting the NH Office of Highway Safety.
Date: Signature:
Name & Title: